SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $153 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $305)

NONPROFIT CORPORATION ANNUAL REPORT

. 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 16 AM 10:30

DOCUMENT # 704990 (1)

1. Corporation Name

HOBE SOUND FIRST AID SQUAD, INC.

Principal Place of Business	Mailing Address
9000 ATHENA P O BOX 213 HOBE SOUND FLORIDA 33475	9000 ATHENA P O BOX 213 HOBE SOUND FLORIDA 33475

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/31/1962
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-6146111 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ FILING FEE IS $61.25
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

9. Name and Address of Current Registered Agent

TAPLIN, NORMAN E. ESQ
C/O Edwards & Angell
250 Royal Palm Way
Suite 300
Palm Beach, Florida 33480

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Norman E Taplin June 12, 1995
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPS	11 TITLE	D ☒ Addition
NAME	BONNELL, ALBERTA	12 NAME	Jeanne Durjan
STREET ADDRESS	7130 SE BLUEBIRD CIR	13 STREET ADDRESS	13630 SE Powerline Rd
CITY-ST-ZIP	HOBE SOUND FL	14 CITY-ST-ZIP	Hobe Sound,FL 33455
TITLE	D	21 TITLE	☐ Change ☒ Addition
NAME	Tony Granims	22 NAME	D
STREET ADDRESS	P.O. Box 4113 N/A	23 STREET ADDRESS	Don Maehlenbrock
CITY-ST-ZIP	Tequesta,FL 33469	24 CITY-ST-ZIP	7767 SE Continental Dr.
TITLE	P	31 TITLE	Hobe Sound,FL 33455
NAME	MILLER, LEE	32 NAME	☐ Change ☐ Addition
STREET ADDRESS	8389 SE CAMELLIA DR	33 STREET ADDRESS	
CITY-ST-ZIP	HOBE SOUND, FL 00000	34 CITY-ST-ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	OWEN, DIANA	42 NAME	
STREET ADDRESS	8546 S.E. MARS ST.	43 STREET ADDRESS	
CITY-ST-ZIP	HOBE SOUND FL	44 CITY-ST-ZIP	
TITLE	SDT	51 TITLE	☐ Change ☐ Addition
NAME	FATORRI, ARMAND	52 NAME	
STREET ADDRESS	12850 S.E. LAUREL VALLY	53 STREET ADDRESS	
CITY-ST-ZIP	HOBE SOUND FL	54 CITY-ST-ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	WALSH, FRED H.	62 NAME	
STREET ADDRESS	9078 S.E. STAR ISLAND WY	63 STREET ADDRESS	
CITY-ST-ZIP	HOBE SOUND FL	64 CITY-ST-ZIP	

CR2E037 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Lee Miller 6/6/95 546-4469
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Lee Miller.President

0012811